

**UNITED STATES PATENT APPLICATION TRANSMITTAL FORM**

22387 U.S.PTO  
10/680077



**Mail Stop Patent Application  
COMMISSIONER FOR PATENTS  
P.O. Box 1450**

**Alexandria, VA 22313-1450**

**Docket No.: 40020837-02**

**Customer No.: 27623**

Dear Sir:

Transmitted herewith for filing is the patent application of

**Inventor(s): Takahisa Mihara, Eiji Ishimoto, Takashi Kondo and Hiroki Nishida**

**For: DISK ROTATING APPARATUS AND INFORMATION  
RECORDING/REPRODUCING APPARATUS**

Enclosed are:

XXX Specification (40 pps.) consisting of: Description (32 pps); Claims (6 pps); Abstract (1 pp);

XXX 10 (ten) sheets of drawings;

XXX Preliminary Amendment;

       Declaration and Power of Attorney;

       An assignment of the invention to: \_\_\_\_\_ including \$40.00 recordation fee and Assignment Recordation Form Cover Sheet;

       Information Disclosure Statement (with copies of patent);

       Form - PTO-1449;

       The undersigned attorney has verified that the applicant is entitled to a Small Entity Status; and

       Priority of U.S. Provisional Patent Application Serial No. \_\_\_\_\_, filed on \_\_\_\_\_ is claimed under 35 U.S.C. §119(e).

       Priority of U.S. Patent Application Serial No. \_\_\_\_\_, filed on \_\_\_\_\_ is claimed under 35 U.S.C. §120.

XXX Priority of application Serial No. 2002-294920 filed on October 8, 2002, in Japan is claimed under 35 U.S.C. §119;

       A Request and Certification Under 35 U.S.C. 122(b)(2)(B)(i).

The Filing Fee is calculated below.

CLAIMS AS FILED				
(1) For	(2) Number Filed	(3) Number Extra	(4) Rate	(5) Basic Fee \$770.00
Total Claims	17 - 20 =	0	x \$18.00	\$0
Independent Claims	12 - 3 =	8	x \$86.00	\$688.00
Multiple Dependent Claim Fee			x \$290.00	= \$0.00
<b>TOTAL FILING FEE</b>				\$
1/2 FILING FEE FOR SMALL ENTITY				\$N/A

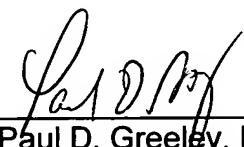
XXX No fee enclosed – filing by missing parts.

       A check in the amount of \$ \_\_\_\_\_ is enclosed.

XXX The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§1.16 and 1.17 which may be required with this communication or during the entire pendency of the application, or credit any overpayment, to **Deposit Account No. 01-0467**. A duplicate copy of this Form is enclosed.

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October 7, 2003  
Date of Signature

  
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